

PTO/SB/08A (07-06)

Substitute for form 1449A/PTO				<b>Complete if Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(Use as many sheets as necessary)</i>				Application Number	09/636,039
				Filing Date	August 9, 2000
				First Named Inventor	Graham, Jamey
				Art Unit	2178
				Examiner Name	Joshua D. Campbell
				Attorney Docket Number	015358-004240US
Sheet	1	of	2		

[illegible][illegible]

Examiner Signature	/Joshua Campbell/	Date Considered	08/21/2007
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Kind Codes of U.S. Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

PTQ/SB/08B (07-06)

Substitute for form 1449B/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(Use as many sheets as necessary)</i>				<b>Complete If Known</b>	
				Application Number	09/636,039
				Filing Date	August 9, 2000
				First Named Inventor	Graham, Jamey
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				Examiner Name	Joshua D. Campbell
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[illegible]

Examiner Signature	/Joshua Campbell/	Date Considered	08/21/2007
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**EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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